‘Child’, ‘adolescent’ and ‘youth’: Definitions

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The United Nations Convention on the Rights of the Child defines a 'child' as any person under the age of 18 years\(^1\). In England, a 'child' is defined as anyone who has not yet reached their 18th birthday\(^2\). Similarly, in Scotland, Wales and Northern Ireland, a 'child' is defined as a person under the age of 18 years\(^2\). The Sri Lanka Journal of Child Health also abides by this definition and only accepts for review articles involving persons less than 18 years of age.

Adolescence is the phase of life stretching between childhood and adulthood. The World Health Organisation (WHO) and the United Nations (UN) define an 'adolescent' as any person between the ages of 10 and 19 years\(^3\). Early adolescence occurs from the ages of 10-14 years while late adolescence encompasses the latter part of the teenage years between the ages of 15-19 years\(^3\). It is important to realise that all 'adolescents' are not children. Teenagers who are 18 and 19 years of age belong to the category of 'youth'. This is important, as our journal does not accept articles involving persons 18 and 19 years of age although they may be grouped under 'adolescents'. Thus, when studies are done on 'adolescents', the ages of the study population should be less than 18 years if you wish to publish the study in a paediatric journal. ‘Adolescent children’ fall into the age range of 10-17 years.

Youth is best understood as a period of transition from the dependence of childhood to adulthood's independence\(^4\). As a category, youth is more fluid than other fixed age groups. The United Nations defines ‘youth’ as those persons between the ages of 15 and 24 years\(^4\).

These definitions are of seminal interest when decisions have to be made regarding the provision of healthcare for these groups of patients. For obvious reasons, some of them, like the adolescents and youth, would need special infrastructure facilities in purpose-built Adolescent Wards. Such units would need specially trained staff as well. There is a need for clear guidelines on the stage or age at which some children who need long-term care will need to be handed over through transition care to physicians who manage adults. There are also some policy decisions that need to be made regarding the cut-off ages for admission to Paediatric Wards. It must be remembered that several studies show that adolescents and youth are quite unhappy in the Paediatric Wards as well as in the Adult Wards.

In Sri Lanka, the current cut-off age for admission to Paediatric Wards is 14 years of age. In an effort to be in compliance with international standards, there are discussions being undertaken at the present time to increase the cut-off age for admission to Paediatric Units to 16 years. There are many sides to this story and one hopes that a reasonable compromise that would benefit both the patients and the care providers would be arrived at eventually.

References


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